

# **SCHEDULE A (FEC Form 3 )** **ITEMIZED RECEIPTS**

Use separate schedule(s)  
or each category of the  
Detailed Summary Page

FOR LINE NUMBER: PAGE 6 / 70

(check only one)

☒ 11a ☐ 11b ☐ 11c ☐ 11d  
☐ 12 ☐ 13a ☐ 13b ☐ 14 ☐ 15

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NAME OF COMMITTEE (In Full)

Butterfield for Congress

Full Name (Last, First, Middle Initial)

**A.** Allan L. Barker

Mailing Address 500 Wildwood Avenue

City State Zip Code  
 Rocky Mount NC 27803-1732

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Self Employed

Occupation  
Optometrist

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 350.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 4 / 2 1 / 2 0 0 7

Transaction ID: C579911

Amount of Each Receipt this Period

350.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**B.** Bernard E. Bell

Mailing Address 2611 8th Avenue  
 Apt. 2M

City State Zip Code  
 New York NY 10030-3497

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Information Requested

Occupation  
Information Requested

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 250.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 2 9 / 2 0 0 7

Transaction ID: C586199

Amount of Each Receipt this Period

250.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

Full Name (Last, First, Middle Initial)

**C.** Kelly Rucker Bingel

Mailing Address 1341 G St NW  
 Ste 1100

City State Zip Code  
 Washington DC 20005-3105

FEC ID number of contributing  
federal political committee.

**C**

Name of Employer  
Mehlman Vogel Castagnetti,  
Inc.

Occupation  
Lobbyist

Receipt For: 2008  
☒ Primary ☐ General  
☐ Other (specify) ▼

Election Cycle-to-Date ▼  
 500.00

Date of Receipt

M M / D D / Y Y Y Y Y  
 0 6 / 1 8 / 2 0 0 7

Transaction ID: C583773

Amount of Each Receipt this Period

500.00

☐ Limit Increased Due to Opponent's  
Spending (2 U.S.C. 441a(i)/441a-1)

**SUBTOTAL** of Receipts This Page (optional) .....

1100.00

**TOTAL** This Period (last page this line number only) .....